

## POSITION

**INITIALS**

ID NO

DATE

Fee Determination  
O.I.P.E. Classifier  
Formality Review  
Response Formality Review

## INDEX OF CLAIMS

Rejected  
Accepted  
Cancelled  
Restricted

Non-entitled  
Entitled  
Appealed  
Appealed

Date	Count	Date	Count
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
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95	95	95	95
96	96	96	96
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99	99	99	99
100	100	100	100

If more than 150 claims or 10 actions  
staple additional sheet here

LEFT INSIDE